

**Fax Cover Sheet****ESTÉE  
LAUDER  
COMPANIES****DATE:** February 5, 2003**TIME:** 5:43 PM**TO:** Examiner M. Willis  
GAU 1617**PHONE:** (703) 305-1679  
**FAX:** (703) 872-9306**FAX RECEIVED****FROM:** Dorene M. Price  
Estée Lauder Companies**PHONE:** (631) 531-1194  
**FAX:** (631) 744-3594

FEB 7 2003

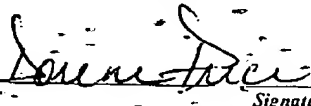
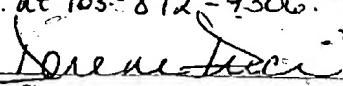
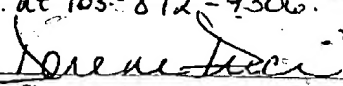
**GROUP 1600****RE:** Response to Office Action *Serial No. 09/773,351***CC:****OFFICIAL**Number of pages including cover sheet: *9***Message**

Please see the attached documents.

1. Certificate of Transmission by Facsimile
- 2. Amendment Transmittal-
- 3. Amendment (6 pp)

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				<b>Docket No.</b> 00.22US	
<b>Applicant(s):</b> Maes et al.					
<b>Serial No.</b> 09/773,351	<b>Filing Date</b> January 31, 2001	<b>Examiner</b> Willis, M.	<b>Group Art Unit</b> 1617		
<b>Invention:</b> - Cholesterol Sulfate and Amino Sugar Compositions for Enhancement of Stratum Corneum Function					
<b>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
<b>TOTAL CLAIMS</b>	19	20	0	x \$18.00	\$0.00
<b>INDEP. CLAIMS</b>	4	4	0	x \$84.00	\$0.00
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 05-1320 A duplicate copy of this sheet is enclosed.<div><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div><div><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div></div>					
<div> Signature</div> <div><b>Dorene M. Price (Reg. No. 43,018)</b> Estee Lauder Companies 125 Pinelawn Road Melville, NY 11747 (631) 531-1194</div>			<div><b>Dated:</b> - February 5, 2003</div> <div> Signature of Person Mailing Correspondence</div> <div><b>DORENE M. PRICE</b> Typed or Printed Name of Person Mailing Correspondence</div>		
<div><b>CC:</b></div> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;"><div>I certify that this document and fee is being deposited on February 5, 2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. at 703-872-9306.</div><div> Signature of Person Mailing Correspondence</div><div><b>DORENE M. PRICE</b> Typed or Printed Name of Person Mailing Correspondence</div></div>					